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CONFIRMATION NO. 4842

<b>SERIAL NUMBER</b> 10/823,363	<b>FILING OR 371(c) DATE</b> 04/12/2004 <b>RULE</b>	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2614	<b>ATTORNEY DOCKET NO.</b> 2542
<b>APPLICANTS</b> Robert H. Miller, Leawood, KS; Elizabeth Roche, Prairie Village, KS; Balaji S. Thenthiruperai, Overland Park, KS; OA				
<b>** CONTINUING DATA *****</b> NONE OA				
<b>** FOREIGN APPLICATIONS *****</b> NONE OA				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 06/24/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance <input checked="" type="checkbox"/> <i>OA</i> Verified and <i>01/24</i> <i>Amwgh</i> <i>OA</i> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> KS	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 38
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 28005				
<b>TITLE</b> Method and system for returning a call based on information in a voicemail message				
<b>FILING FEE RECEIVED</b> 1094	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	